



Outreach Program

Wisconsin Educational Services Program for the Deaf and Hard of Hearing

Elizabeth Burmaster, State Superintendent

Wisconsin Department of Public Instruction

Alex H. Slappey, Director WESPDHH

Marcy Dicker, Director Outreach Program

Referral Submitted by: _____ Date: _____

Child's Name _____ Birth date _____

Parent / Guardian _____ Telephone _____

Address _____
Street City State Zip

Email _____

School District or County of Residence _____

School or B-3 Program child attends _____

B-3 / Educational Contact _____

Title _____ Telephone _____ Email _____

Address _____
Street City State Zip

Who is on the child's educational team?

Name	Role	Telephone	Email
------	------	-----------	-------

Name	Role	Telephone	Email
------	------	-----------	-------

Name	Role	Telephone	Email
------	------	-----------	-------

Release of information received? ☐ Yes ☐ No

Comments

Complete form / save as attachment / return via email to:

Marcy.dicker@wesp-dhh.wi.gov or print completed form and fax to: Attn: M. Dicker @ 262-787-9501

Or mail to: M Dicker, WESP-DHH Outreach, 19601 West Bluemound Rd. Suite 200, Brookfield, WI 53045

